| | Document Page lentify your case: | e 1 of 56 FILED |
|--|--|--|
| | | UNITED STATES BANKRUPTCY COURT |
| United States Bankruptcy Co | urt for the: | NORTHERN DISTRICT OF ILLINOIS |
| Northern District of Illinois | | SEP 2.9 2016 |
| Case number (If known): | Chapter you are filing unde | |
| | № Chapter 7 | JEFFREY P. ALLSTEADT, CLERK |
| | Chapter 11 Chapter 12 | OLITHETT: ALLOTEADT, CLERK |
| | Chapter 13 | ☐ Check if this is an |
| and the second section of the section of t | | amended filing |
| Official Form 404 | | - |
| Official Form 101 | | |
| Voluntary Pe | tition for Individuals I | F-18 |
| | IOI HIGHVIQUAIS | married couple may file a bankruptcy case together—called a both debtors. For example, if a few case together—called a |
| ee as complete and accurate a information. If more space is n if known). Answer every quest | m manuth | ed about the spouses separately, the form uses <i>Debtor 1</i> and report information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The her, both are equally responsible for supplying correct he top of any additional pages, write your name and case number. |
| art 13 Identify Yourself | About Debtor 1: | |
| Your full name | | About Debtor 2 (Spouse Only in a Joint Case): |
| Write the name that is on your | DIBAON | |
| government-issued picture identification (for example, | DUWON First name | |
| your driver's license or | | First name |
| passport). | Middle name | Middle name |
| Bring your picture identification to your meeting | GADDIS Last name | |
| with the trustee. | word ratific | Last name |
| | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| | | Gunz (Gr., Jr., II, III) |
| | | |
| | The state of the s | |
| All other names you have used in the last 8 | and a second a second and a second a second and a second a second and a second and a second and | |
| have used in the last 8 | First name | First name |
| have used in the last 8 years Include your married or | First name | |
| have used in the last 8 years Include your married or | Middle name | First name Middle name |
| have used in the last 8 years Include your married or | | |
| have used in the last 8 years Include your married or | Middle name Last name | Middle name |
| have used in the last 8 years Include your married or | Middle name | Middle name |
| have used in the last 8 years | Middle name Last name | Middle name Last name First name |
| have used in the last 8 years Include your married or | Middle name Last name First name | Middle name Last name |
| have used in the last 8 years Include your married or | Middle name Last name First name | Middle name Last name First name Middle name |
| years Include your married or | Middle name Last name First name Middle name | Middle name Last name First name |
| have used in the last 8 years Include your married or | Middle name Last name First name Middle name | Middle name Last name First name Middle name |
| have used in the last 8 years Include your married or maiden names. | Middle name Last name First name Middle name | Middle name Last name First name Middle name |
| have used in the last 8 years Include your married or maiden names. Only the last 4 digits of | Middle name Last name Middle name Last name | Middle name Last name Middle name Last name |
| have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal | Middle name Last name First name Middle name | Middle name Last name Middle name Last name XXX - XX - |
| have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal addividual Taxpaver | Middle name Last name Middle name Last name XXX - XX - 1 9 2 0 OR | Last name First name Middle name Last name XXX - XX - OR |
| have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal addividual Taxpaver | Middle name Last name Middle name Last name XXX - XX - 1 9 2 0 | Middle name Last name Middle name Last name XXX - XX - |

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| Debtor 1 DUWON GA | | Caca number of | | |
|---|--|---|---|--|
| | First Name Middle | Name Last Name | - Villa - Said | Case number (if known) |
| Unput executiva participativa de estrega | ki di Calaghian kang di Kanada dan kanada da | About Debtor 1: | en e | About Debtor 2 (Spouse Only in a Joint Case): |
| and En Identifi (EIN) yo | siness names nployer cation Numbers ou have used in | I have not used any | business names or EINs. | l have not used any business names or EINs. |
| | t 8 years rade names and | Business name | | Business name |
| doing bu | siness as names | Business name | *************************************** | Business name |
| | | EIN | | EIN |
| | | EIN | | EIN |
| 5. Where y | ou live | | tion to the state of the state | If Debtor 2 lives at a different address: |
| | | 13 WEST 137TH S | TREET | Number Street |
| | | RIVERDALE City | IL 60827 State ZIP Code | City State 7/D Code |
| | | COOK County | | City State ZIP Code County |
| | | if your mailing address i above, fill it in here. Note any notices to you at this | is different from the one e that the court will send mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | | Number Street |
| | | P.O. Box | | P.O. Box |
| POTESTO LANGUAGO PARA SANTENINA MANGANGAN SANGANGAN SANGANGAN SANGANGAN SANGANGAN SANGANGAN SANGANGAN SANGANGAN | ortada da sana a sana sana sana sana sana s | City | State ZIP Code | City State ZIP Code |
| . Why you this distri bankrupto | are choosing oct to file for cy | Check one: Over the last 180 days I have lived in this distri | before filing this petition, ict longer than in any | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any |
| | | I have another reason. (See 28 U.S.C. § 1408. | Explain.) | other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | | |
| | | | | |

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DUWON GADDIS Debtor 1 Case number (Fknown) **Tell the Court About Your Bankruptcy Case** Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy Code you for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☑ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ☐ No bankruptcy within the last 8 years? Yes. District DISMISSED When MM / DD / YYYY MM / DD / YYYY District MM / DD / YYYY 10. Are any bankruptcy Mo No cases pending or being filed by a spouse who is Yes. Debtor __ not filing this case with ___ Relationship to you you, or by a business When Case number, if known partner, or by an MM / DD / YYYY affiliate? Debtor Relationship to you When Case number, if known MM / DD / YYYY 11. Do you rent your O No. Go to line 12. residence? 2 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

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DUWON GADDIS Debtor 1 Last Name Case number (# known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor 2 No. Go to Part 4. of any full- or part-time business? Yes. Name and location of business A sole proprietorship is a business you operate as an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. Number Street If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it Chapter 11 of the can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Bankruptcy Code and most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: 14. Do you own or have any Z No property that poses or is alleged to pose a threat Yes. What is the hazard? of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed?____ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street

City

ZIP Code

State

Debtor 1

<u>DUWON GADDIS</u>

| Case number (| |
|---------------|--|
| | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About | Debtor | 1 |
|-------|--------|---|
|-------|--------|---|

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

| Q | I am not required to receive a briefing a credit counseling because of: | abou |
|---|--|------|
| | | |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

| I am not required to receive a briefing about credit counseling because of: |
|--|
|--|

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so. Active duty. I am currently on active military

duty in a military combat zone. If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Document Page 6 of 56

| Debtor 1 <u>DUWON</u> First Name Mi | ddie Name Last Name | Case numb | NGF (if known) |
|--|--|--|---|
| Part 6: Answer These | Questions for Reporting P | urposes | |
| 16. What kind of debts do you have? | WU. GO TO line 16 | rimarily consumer debts? Consumer dividual primarily for a personal, family, or b. | r debts are defined in 11 U.S.C. § 101(8) household purpose." |
| | Yes. Go to line 1 | | |
| | money for a business | rimarily business debts? Business de or investment or through the operation of | ebts are debts that you incurred to obtain |
| | Yes. Go to line 17 | • | |
| | 16c. State the type of debte | s you owe that are not consumer debts or | business debts. |
| 17. Are you filing under Chapter 7? | ☐ No. I am not filing unde | er Chapter 7. Go to line 18 | |
| Do you estimate that after any exempt property is excluded and | er V Yes. I am filing under Cr administrative expe | napter 7. Do you estimate that after any ex nases are paid that funds will be available | cempt property is excluded and |
| administrative expenses are paid that funds will b available for distribution to unsecured creditors? | o | | definition to unsecured creditors? |
| 18. How many creditors do | 1-49 | | |
| you estimate that you owe? | 50-99 | 1,000-5,000 5,001-10,000 | 25,001-50,000 |
| - NOVO TO GODEN (ANEXO) PROGED NO SIGNA PROCESSAL ANEXO SIGNA ANEXO SI SIGNA ANEXO SIGNA SIGNA ANEXO SIGNA SIGNA ANEXO SIGNA ANEXO SIGNA ANEXO SIGNA S | 100-199 200-999 | 10,001-25,000 | 50,001-100,000 |
| 19. How much do you | 2 \$0-\$50,000 | | ☐ More than 100,000 |
| estimate your assets to be worth? | \$50,001-\$100,000 | \$1,000,001-\$10 million | \$500,000,004,004,000,004 |
| so wordly | \$100,001-\$500 000 | → \$10,000,001-\$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion |
| | ☐ \$500,001-\$1 million | \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion |
| 20. How much do you | \$0-\$50,000 | \$100,000,001-\$500 million | More than \$50 billion |
| estimate your liabilities | \$50,001-\$100,000 | \$1,000,001-\$10 million | A CONTRACT OF THE PROPERTY OF |
| to be? | \$100,001-\$500,000 | ■ \$10,000,001-\$50 million | \$500,000,001-\$1 billion |
| | \$500,001-\$1 million | ■ \$50,000,001-\$100 million | \$1,000,000,001-\$10 billion |
| Part 7: Sign Below | Thinlon | \$100,000,001-\$500 million | \$10,000,000,001-\$50 billion More than \$50 billion |
| For you | I have examined this petition, ar correct. | nd I declare under penalty of perjury that the | ne information provided is true and |
| · (| of title 11, United States Code. I Under Chapter 7. | apter 7, I am aware that I may proceed, if a understand the relief available under each | eligible, under Chapter 7, 11,12, or 13 |
| ti | his document, I have obtained a | I did not pay or agree to pay someone who | no is not an attorney to hole make |
| 1 | understand making a falso at- | on the chapter of title 11, United States Cod | le, specified in this petition. |
| w 18 | ith a bankruptcy case can result 3 U.S.C. 8 152, 1341, 1519, an | ment, concealing property, or obtaining moin fines up to \$250,000, or imprisonment of 3571. | oney or property by fraud in connection for up to 20 years, or both. |
| 3 | · Mus / | WY x A | DD |
| | Signature of Debtor 1 | GIV Signature of | Debtor 2 |
| e transmitte ed En Maria Barrelland e de la contractiva e la companyación de decembra de la contractiva en la c | Executed on 09/26/2016 MM / DD / YY | Executed on | |

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| | First Name Middle Nam | ne Last Name | Case number (# known) | | | |
|--|---------------------------------|---|--|--|--|--|
| epresente Fyou are i | 10t represented | to proceed under Chapter 7, 11, 12, or 1; available under each chapter for which the notice required by 11 U.S.C. 8, 242(b) | this petition, declare that I have in 3 of title 11, United States Code, a ne person is eligible. I also certify | nd have explained the relief that I have delivered to the debtors | | |
| by an attorney, you do not need to file this page. | ney, you do not e this page. | and schedules lifed with the petition is incorrect. | | | | |
| | , 0 | Signature of Attorney for Debtor | Date | MM / DD /YYYY | | |
| | | | | 25 7177 | | |
| | | Printed name | | | | |
| | | Firm name | | | | |
| | | Number Street | | | | |
| | | City | | | | |
| | | City | State | ZIP Code | | |
| | | Contact phone | Email address | | | |
| | | Bar number | | | | |
| | | per northbet | State | | | |
| | 4 | | | | | |

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Debtor 1

DUWON GADDIS

Last Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

| e and that if your bankruptcy forms are coned? |
|---|
| ttorney to help you fill out your bankruptcy forms? |
| ttorney to neip you fill out your bankruptcy forms? |
| claration, and Signature (Official Form 119). |
| isks involved in filing without an attorney. I |
| that filing a bankruptcy case without an I do not properly handle the case. |
| I do not properly handle the case. |
| I do not properly handle the case. Signature of Debtor 2 Date |
| I do not properly handle the case. Signature of Debtor 2 |
| C Signature of Debtor 2 Date MM / DD / YYYY |
| 1 |

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| | Par Name | | |
|--------------------|----------------------|------------------------------|--------------|
| Debtor 1 | DUWON GAL | DDIS | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | enot leating |
| Spouse, if filing) | First Name | Middle Name | Last Name |
| nited States E | Bankruptcy Court for | the: Northern District of II | linois |
| ase number | | | |
| | (If known) | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct 12/15 information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Schedule A/B: Property (Official Form 106A/B) | Your assets Value of what you own |
|--|--|
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$ |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$\$275.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | |
| Part 2: Summarize Your Liabilities | \$\$ |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Your liabilities Amount you owe \$0.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ 40,908.00 |
| Your total liabilities | \$40,908.00 |
| Summarize Your Income and Expenses | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ 0.00 |
| Schedule J: Your Expenses (Official Form 106.1) | |
| Copy your monthly expenses from line 22c of Schedule J | s 435.00 |

Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Page 10 of 56 Document **DUWON GADDIS** Debtor 1 Case number (if kn Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 0.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d. Student loans. (Copy line 6f.) 0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

0.00

0.00

0.00

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| F:0 : 0 : 1 | | D | <u>ocument</u> | Page 1 |
|---------------------|---------------------|----------------------------------|---|--------|
| FIII IN INIS II | formation to id | entify your case and this | filing: | |
| Debtor 1 | DUWON GA | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court fo | or the: Northern District of III | inois | |
| Case number | | | | |
| | | | *************************************** | |
| | | | | |
| | | | | |

Official Form 106A/B

Schedule A/B: Property

12/15

Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| | No. Go to Part 2. Yes. Where is the property? | MIL-12 II | | |
|---------------|---|---|--|---|
| 1.1 | Street address, if available, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | ed claims on Schedule L ims Secured by Property |
| | City State ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | | Debtor 1 only | | |
| | County | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co | mmunity property |
| t. | | | | |
| f you 1.2. | own or have more than one, list here: Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured clai the amount of any secured Creditors Who Have Claim | i claims on Schedule Di |
| | own or have more than one, list here: Street address, if available, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | the amount of any secured Creditors Who Have Claim Current value of the | claims on Schedule D. S Secured by Property. |
| | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any secured Creditors Who Have Claim Current value of the | claims on Schedule D. s Secured by Property. Current value of the portion you own? \$ your ownership imple, fenancy by |

| | 1.3. Street address, if available, or other descrip | Condominium or cooperative Manufactured or mobile home | Creditors Who Have | ed claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property. the Current value of the portion you own? |
|--|--|---|--|---|
| | City State ZIP | Land Investment property Code Timeshare Other Who has an interest in the property? Check on | the entireties, or a | sire of your ownership fee simple, tenancy by a life estate), if known. |
| | County | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this property identification number: | Check if this is (see instructions | community property |
| 2. Add you | d the dollar value of the portion you own I have attached for Part 1. Write that num | for all of your entries from Part 1, including any entr ber here. | ies for pages | \$0.00 |
| | own, lease, or have legal or equitable in that someone else drives. If you lease a w | erest in any vehicles, whether they are registered or hicle, also report it on Schedule G: Executory Contracts | not? Include any vehicle and Unexpired Leases. | es |
|)o you ou owr | own, lease, or have legal or equitable in that someone else drives. If you lease a ve s, vans, trucks, tractors, sport utility vehi | most, that report it of Scriedule G: Executory Contracts | not? Include any vehick and Unexpired Leases. | es |
| O you ou owr Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ve s, vans, trucks, tractors, sport utility vehi | cles, motorcycles | and Unexpired Leases. | |
| o you ou owr Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ve s, vans, trucks, tractors, sport utility vehi | cles, motorcycles Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure | laims or exemptions. Put |
| o you ou owr Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ve s, vans, trucks, tractors, sport utility vehi No (es Make: | Who has an interest in the property? Check one. Debtor 1 only | and Unexpired Leases. | laims or exemptions. Put |
| o you ou owr Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ves, vans, trucks, tractors, sport utility vehicles Make: Model: Year: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair. | laims or exemptions. Put ed claims on Schedule D: ms Secured by Property. |
| Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ves, vans, trucks, tractors, sport utility vehicles Make: Model: Year: Approximate mileage: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Claim | laims or exemptions. Put |
| Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ves, vans, trucks, tractors, sport utility vehicles Make: Model: Year: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair. | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| Cars | own, lease, or have legal or equitable in that someone else drives. If you lease a ves, vans, trucks, tractors, sport utility vehicles Make: Model: Year: Approximate mileage: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | laims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| O you own Cars On Your 3.1. | own, lease, or have legal or equitable in that someone else drives. If you lease a vest, vans, trucks, tractors, sport utility vehicles Make: Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair. Current value of the entire property? | laims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ |
| O you owr Cars Cars 3.1. | own, lease, or have legal or equitable in that someone else drives. If you lease a verse, vans, trucks, tractors, sport utility vehicles Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe here: Make: Model: Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clair | laims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ |
| O you own Cars Cars 3.1. If you 3.2. | own, lease, or have legal or equitable in that someone else drives. If you lease a verse, vans, trucks, tractors, sport utility vehicles Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe here: Make: Model: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clait the amount of any secure clairs. | laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$ |
| Cars Cars 3.1. | own, lease, or have legal or equitable in that someone else drives. If you lease a version of that someone else drives. If you lease a version of the someone else drives. If you lease a version of the someone else drives. If you lease a version of the someone else drives. If you lease a version of the someone else drives. If you lease a version of the someone else drives. If you lease a version of the someone else drives. If you lease a version of the someone else drives. If you lease a version else else drives. If you lease a version else else drives. If you lease a version else else else else else else else els | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Claim Do not deduct secured of the entire property? \$ Do not deduct secured claim amount of any secure Creditors Who Have Claim Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$ |
| Cars Cars 3.1. | own, lease, or have legal or equitable in that someone else drives. If you lease a verse, vans, trucks, tractors, sport utility vehicles Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe here: Make: Model: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure creditors Who Have Claim Do not deduct secured of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim Creditors Who Have Claim | laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$ |

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| | | Who has an interest in the property? Check one. | | |
|--|---|---|--|--|
| | Model: | J | Po not acadet sectitet | l claims or exemptions. Put ured claims on <i>Schedule D</i> |
| | Year: | Debtor 2 only | Creditors Who Have C | laims Secured by Property. |
| | | Debtor 1 and Debtor 2 only | Current value of th | |
| | Approximate mileage: Other information: | At least one of the debtors and another | entire property? | portion you own? |
| | outer anomalon. | ☐ Check if this is community property (see | \$ | _ \$ |
| | | instructions) | | |
| .4. | Make: | Who has an interest in the property? Check one. | Do not deduct secured | claims or exemptions. Put |
| | Model: | Debtor 1 only | the amount of any secu | ted claims on Schodula D. |
| | Year: | Debtor 2 only | Creditors who Have Ci | aims Secured by Property. |
| | Approximate mileage: | ■ Debtor 1 and Debtor 2 only | Current value of the | |
| | Other information: | At least one of the debtors and another | entire property? | portion you own? |
| | | Check if this is community property (see instructions) | \$ | \$ |
| No Yes | s | s and other recreational vehicles, other vehicles, and access al watercraft, fishing vessels, snowmobiles, motorcycle accessor | sories ries | |
| No Yes 1. No 1. No Y | Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Sories ries Do not deduct secured classes the amount of any secure Creditors Who Have Claim | d claims on Schedule D |
| No Yes | flake: | Who has an interest in the property? Check one. Debtor 1 only | ries Do not deduct secured clar the amount of any secure | d claims on Schedule D |
| No Yes | Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Claim | d claims on Schedule D: ns Secured by Property. Current value of the |
| No l Yes | Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured ck the amount of any secure Creditors Who Have Clair Current value of the entire property? | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? |
| No Yes | Make: Model: Tear: Wither information: With or have more than one, list here: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? | claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |
| No Yes | Make: Model: Pear: Wither information: With or have more than one, list here: ake: podel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clair the amount of any secured | claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |
| No N | Make: Model: Tear: Wher information: In or have more than one, list here: ake: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured claime amount of any secure Creditors Who Have Claime Current value of the entire property? \$ | claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |
| No Yes | Make: Model: Pear: Wither information: With or have more than one, list here: ake: podel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 1 and Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the | claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |

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Part 3: Describe Your Personal and Household Items

| | o you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claim or exemptions. |
|-------------|---|---|
| 6 | Household goods and furnishings | or exemptions. |
| | Examples: Major appliances, furniture, linens, china, kitchenware | |
| | Ø No | |
| | Yes. Describe | |
| | | \$ |
| 7. | Electronics | |
| | Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games | |
| | 2 No | |
| | Yes. Describe | |
| ^ | Calle 201 | \$ |
| ಕ. | Collectibles of value | |
| | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No | |
| | Yes. Describe | |
| | | \$ |
| 9, | Equipment for sports and hobbies | |
| | Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments | |
| | T78 | |
| | Yes. Describe | |
| | | \$ |
| 10. | Firearms | |
| | Examples: Pistols, rifles, shotguns, ammunition, and related equipment 2 No | |
| | Yes. Describe | \$ |
| 11.6 | Diothes | |
| | Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No | |
| | Yes, Describe SHIRTS, PANTS, JACKETS & SHOES | \$ 275.00 |
| 2. | ewetry | |
| ı | Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | |
| | 2 No | · |
| | on-farm animals | \$ |
| | examples: Dogs, cats, birds, horses | |
| | No No | |
| Ĺ | Tes. Describe | |
| 4. A | ny other personal and household items you did not already list, including any health aids you did not list | \$ |
| <u></u> | No | |
| | Yes. Give specific | |
| _ | information. | \$ |
| ; A | | - |
| fc | dd the dollar value of all of your entries from Part 3, including any entries for pages you have attached | \$ 275.00 |
| | r Part 3. Write that number here | ¥ |

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| 30.0 | AV Rese | 900 | Victoria A | Your | - |
|------|---------|-----|------------|------|---|
| | | | | | |
| | 1810 | | | | |

Part 4: Describe Your Financial Assets

| | e any legal or equitable interes | in any of the following? | | Current value of the portion you own? Do not deduct secured classifications of the control of th |
|--|---|---|-------------------------|--|
| 16. Cash | | | | or exemptions. |
| champles: Money | you have in your wallet, in your | ome, in a safe deposit box, and on hand when you file | P. VOUE notition | |
| | | | - Jour position | |
| Yes | | | | |
| | | (| Cash: | \$25.0 |
| Deposits of mone Examples: Checking and oth | na. savings or other francist | ounts; certificates of deposit; shares in credit unions, to multiple accounts with the same institution, list each | nrokeraga bayas | |
| KU No | | ounts; certificates of deposit; shares in credit unions, be multiple accounts with the same institution, list each. | workerage nouse. | 5, |
| ☐ Yes | ••• | Institution name: | | |
| | 17.1. Checking account: | | | |
| | 17.2. Checking account: | | | |
| | 17.3. Savings account: | | | |
| | 17.4. Savings account: | | | |
| | 17.5. Certificates of deposit: | | | |
| | 17.6. Other financial account: | | | \$ |
| | 17.7. Other financial account: | | | \$ |
| | 17.8. Other financial account: | | | \$ |
| | 17.9. Other financial account: | | | \$ |
| | and docoung | | | \$ |
| <i>txampies:</i> Bond funds ∕ No | | rage firms, money market accounts | | |
|] Yes | Institution or issuer name: | | | |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | |
| | | | | |
| on-publicly traded s n LLC, partnership, a | tock and interests in incorpora and joint venture | ed and unincorporated businesses, including an i | nterest in | |
| 1 No | tock and interests in incorpora and joint venture Name of entity: | | | |
| No Yes. Give specific | Name of entity: | % of a | nterest in wnership: | |
| 1 No | Name of entity: | % of ox 0% | wnership: | \$ |
| No Yes. Give specific information about | Name of entity: | % of a | wnership: | \$ \$ |

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| Non-negotiable instr ☑ No | nts include personal che uments are those you ca | ner negotiable and non-necks, cashiers' checks, pron nnot transfer to someone b | nissory notes, and money by signing or delivering the | orders. em. | |
|---|--|---|--|-----------------------|--------------------------------------|
| Yes. Give specific information about them | s Issuer name: | | | | |
| | | | | | S |
| | | | | | \$ |
| | | | | | \$ \$ |
| 21. Retirement or pension | on accounts | | | | |
| ✓ Interests in | IRA, ERISA, Keogh, 40 | I(k), 403(b), thrift savings a | accounts or other name | _ | |
| Yes. List each | | • | or other pension | or profit-sharing pla | ans |
| account separately | . Type of account: | nstitution name: | | | |
| | 401(k) or similar plan: | | | | |
| | Pension plan: | | | | \$ |
| | IRA: | | | | . |
| | Retirement account: | | | | * |
| | | | | | |
| | Keogh; | | | | |
| | Additional account: | | | | |
| | Additional account: | | | | \$ |
| TOUI Share of all unueged. | donasia. | | service or use from a com- | | |
| TOUI Share of all unuegal. | donasia. | so that you may continue s t, public utilities (electric, g | | | |
| Examples: Agreements w companies, or others | deposits you have made ith landlords, prepaid re | so that you may continue s t, public utilities (electric, g | | | |
| Examples: Agreements w companies, or others No Yes | deposits you have made ith landlords, prepaid re Instituti | | | | |
| Examples: Agreements w companies, or others No Yes | deposits you have made ith landlords, prepaid re Instituti Electric: | so that you may continue s t, public utilities (electric, g | | | \$ |
| Examples: Agreements w companies, or others No Yes | deposits you have made ith landlords, prepaid re Instituti Electric: | so that you may continue s t, public utilities (electric, g | | | \$\$\$\$ |
| Examples: Agreements w companies, or others No Yes | deposits you have made ith landlords, prepaid re Institutive lectric: Bas: | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid re Institutive lectric: Bas: | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid refine institution in the image in the image is a second or institution in the i | so that you may continue s t, public utilities (electric, g | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid re Institution landlords. Institution landlords: Electric: Electric: Electric landlords are landlords are landlords are landlords are landlords. Elephone: | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid religible landlords, prepaid religible landlords, prepaid religible landlords, prepaid rental universal rental universal rental landlords, prepaid rent: | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid re Institution Insti | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid re Institution Insti | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a comp as, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | Instituti | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a compas, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid re Institution landlords, prepaid re Institution landlords. Prepaid rent landlords are later; later: la | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a compas, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | Instituti | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a compas, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ \$\$ |
| No Ves Yes Provided the second of | deposits you have made ith landlords, prepaid re Institution landlords, prepaid re Institution landlords. Prepaid rent landlords are later; later: la | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a compas, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ \$\$ |
| Examples: Agreements we companies, or others No Yes | deposits you have made ith landlords, prepaid re Institution landlords, prepaid re Institution landlords. Prepaid rent landlords are later; later: la | so that you may continue s t, public utilities (electric, g n name or individual: | service or use from a compas, water), telecommunica | Dany Itions | \$\$ \$\$ \$\$ \$\$ \$\$ |

Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Document Page 17 of 56 Case number (if known) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. **2** No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers V No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Z No Yes. Give specific information about them.... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured 28. Tax refunds owed to you claims or exemptions. 2 No Yes. Give specific information about them, including whether Federal: you already filed the returns and the tax years. State: Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else 2 No

☐ Yes. Give specific information.....

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| Debtor 1 Case 16- | 31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14 N GADDIS Document Page 19 of 56 Case number (| | Desc Main |
|-----------------------------|---|----------------|--|
| | | ii known) | |
| 40. Machinery, fixtures | , equipment, supplies you use in business, and tools of your trade | | |
| _ 110 | and tools of your trade | | |
| Yes. Describe | | w | |
| | | | s |
| 41. Inventory | | | |
| ☑ No | W-market many | | |
| Yes. Describe | | | |
| | | | \$ |
| 42. Interests in partners! | nine or joint wast | | |
| ₩ No | | | |
| Yes. Describe | Maria de la companya della companya della companya della companya de la companya della companya | | |
| | | 0/ 06 | |
| | | % of ownership |); |
| | | % | \$ |
| | | % | \$ |
| 43 Customer lists, mailin | g lists, or other compilations | % | \$ |
| | | | |
| Yes. Do your lists i | include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | | |
| ☐ No | defined in 11 U.S.C. § 101(41A))? | , | |
| Yes. Description | be | | |
| | | | \$ |
| Yes Give annais. | roperty you did not already list | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| ****** | | | \$ |
| 45. Add the dollar value as | | | \$ |
| for Part 5. Write that num | ll of your entries from Part 5, including any entries for pages you have attache | | |
| | il of your entries from Part 5, including any entries for pages you have attache | :a → | \$0.00 |
| Part 6: Describe Any I | Farm- and Commercial Fishing-Related Property You Own or Have as ye an interest in farmland, list it in Part 1. Pegal or equitable interest in any farm- or commercial fishing-related property? | n Interest In | |
| : | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | \$ |
| Official Form 106A/B | Schedule A/B: Property | | |

| Debtor 1 DUWON GADDIS Do | ocument P | Entered 09/29/16 14:40:4 Page 20 of 56 | |
|--|--|--|--|
| Last Name | e | Case number (if known) | |
| 48. Crops—either growing or harvested | | | |
| M1 Ata | | | |
| Yes. Give specific | *** ** ** ** ** ** ** ** ** ** ** ** ** | • | |
| | | | THE PARTIES AND ADDRESS AND AD |
| 49. Farm and fishing equipment, implements, machine | and the second of the factor of the factor of the second o | | |
| No No | nery, fixtures, and i | looks of trade | <u> </u> |
| Yes | | or dade | _ |
| Yes | and a fifther const. | | |
| <u></u> | | | |
| 50. Farm and fishing supplies, chemicals, and feed | the state of the production and the state of the product of the state | | \$ |
| %∠I No | | | ······································ |
| ☐ Yes | | | |
| ☐ Yes | enderson man on man observation and observation may be according to the second of the | | |
| | | and a second service of the second | |
| 51. Any farm- and com- | | | TOTAL CONTRACTOR CONTR |
| 51. Any farm- and commercial fishing-related property y | you did not alroad | V II. | \$ |
| Yes. Give specific | | y list | |
| information | terior and the second s | | |
| · · · · · · · · · · · · · · · · · · · | | | |
| 52. Add the dollar value of all of | | | • |
| 52. Add the dollar value of all of your entries from Part 6 for Part 6. Write that number here | 6, including anv en | tries for pages | \$ |
| | | not pages you have attached | 0.00 |
| Mary transfer of the Control of the | | | → \$0.00 |
| | | | |
| Part 7: Describe All Property You Own or I | Have an Ind | | |
| No Yes. Give specific information | | | \$ |
| the state of the s | | | \$ |
| 54. Add the dollar value of all of your entries from Part 7. W | | | \$ |
| or your entries from Part 7. W | Vrite that number h | nere | |
| | | | \$0.00 |
| Part 8: List the Totals of Each Part of this Fo | | | |
| of Lacil Part of this Fe | orm | | |
| 55. Part 1: Total real estate, line 2 | | | |
| The L | | | |
| 56. Part 2: Total vehicles, line 5 | | | → \$ |
| | \$ | 0.00 | |
| 57. Part 3: Total personal and household items, line 15 | | | |
| 58 Part 4: Total C | \$ | 275.00 | |
| 58. Part 4: Total financial assets, line 36 | • | 25.00 | |
| | \$ | 25.00 | |
| 59. Part 5: Total business-related property, line 45 | \$ | 0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | 4 | | |
| and naming-related property, line 52 | \$ | 0.00 | |
| 61. Part 7: Total other property not listed, line 54 | , | | No. |
| | + \$ | 0.00 | *************************************** |
| 62. Total personal property. Add lines 56 through 61, | | The second secon | A BOOK TO THE TOTAL THE TO |
| hard lines 56 through 61. | ··· \$_ | 300.00 Copy no | A-ACC |
| | | Copy personal property total | → +s300.00 |
| 53. Total of all property on 2 states | | | |
| Schedule A/B. Add line 55 + line 62 | ******* | | void-tup |
| 53. Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$ 300.00 |
| Official Form 106A/B | | | Notice of the second |
| Schodule | e A/B: Property | | Amazopki |
| Chedille | ~ ~ □. Property | | WALL TO SEE STATE OF THE SEE STATE OF TH |

Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Page 21 of 56 Document Fill in this information to identify your case: **DUWON GADDIS** Debtor 1 Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) ☐ Check if this is an amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1 Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Schedule A/B that lists this property Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief MONEY ON HAND description: \$25.00 **□** \$ 25.00 Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit Brief CLOTHES description: \$275.00 **□** \$ 275.00 Line from 100% of fair market value, up to Schedule A/B. any applicable statutory limit Brief description: □ \$ Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit

No Yes

☑ No

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Debtor 1

Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main DUWON GADDIS Document Page 22 of 56 Case number (# First Name Lest Name Les Page 22 of 56
Case number (# known)

| Parti 2: Ad | ditional | Page |
|-------------|----------|------|
|-------------|----------|------|

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--|---|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | \$ | Π. | |
| Line from Schedule A/B: | | \$ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | _ | |
| Line from Schedule A/B: ——— | <u> </u> | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | _ 🗆 \$ | |
| Line from Schedule A/B: | *************************************** | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | - \$ | _ 🗖 \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | . \$ | | |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | 100% of fair market value, up to | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | | |
| ine from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief escription: | \$ | - s | |
| ine from chedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| rief escription: | \$ | | |
| ne from chedule A/B: ——— | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| rief escription: | \$ | □ \$ | |
| ne from Chedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |

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| | | | | cument Page 23 (| of 56 | | | |
|--|--|--|---|--|---|--|--|--|
| | Fill in this in | formation to identify yo | our case: | | | | | |
| | Debtor 1 | DUWON GADDIS | | | | | | |
| İ | Deptor | First Name | Middle Name | Last Name | | | | |
| f | Debtor 2 (Spouse, if filing) | First Name | Middle Name | | | | | |
| ļ | | | | Last Name | | | | |
| | | Bankruptcy Court for the: No | rtnem District of Illinoi | S | | | | |
| | Case number (If known) | | | - | | | ☐ Check | if this is an |
| | | | | | | | | led filing |
| | Official | C 100D | | | | | | ū |
| _ | | Form 106D | | | | | | |
| • | Sched | ule D: Credi | tors Who h | lave Claims Se | cur | ed by Prop | perty | 12/15 |
| E | Be as compl | ete and accurate as pos | sible. If two married | people are filing together, ho | th are e | gually roomanaihia f | | ·+ |
| - 1 | mormanon, | if more space is needed ges, write your name ar | i. CODY the Additiona | Page fill it out number the | entries, | and attach it to this | form. On the top of | fany |
| • | round of the pe | goo, write your name at | id case number (ii Ki | iown). | | | | |
| 1. | Do any cre | ditors have claims secu | red by your property | 1? | | | | |
| | No. Ch | eck this box and submit th | nis form to the court wi | th your other schedules. You h | ave noth | ning else to report on t | his form. | |
| | Yes. Fi | I in all of the information t | pelow. | | | • | | |
| SOURCE OF THE PARTY OF THE PART | 28/5/45/2 28/5/5/ | | | | | | | |
| Z | ant the Lis | t All Secured Claims | | | | | | |
| 2 | tiet all soo | read alaima. If a condition | L | | *************************************** | Column A | Column B | Column C |
| ۷. | for each cla | ured claims. If a creditor im. If more than one cred | nas more than one se titor has a narticular ci | cured claim, list the creditor se aim, list the other creditors in P | parately | Amount of claim | Value of collateral | Unsecured |
| | As much as | possible, list the claims i | n alphabetical order a | ccording to the creditor's name. | an 2. | Do not deduct the | that supports this | portion |
| 2. | | | • | 3 | | value of collateral. | claim | if any |
| ۷. | <u></u> | | Describe the p | roperty that secures the claim: | | \$ | \$ | \$ |
| | Creditor's Nan | e | | | | 7 | | * |
| | Number | Ct1 | | | | | | |
| | Number | Street | A | PATE A CAN THE CONTROL OF THE CONTRO | | _] | | |
| | | 4.5-4 | Contingent | you file, the claim is: Check all the | hat apply | | | |
| | | | Unliquidated | | | | | |
| | City | State ZIP Co | o.mqanaaroo | | | | | |
| ١ | Who owes th | e debt? Check one. | • | Observation and all and a second of | | | | |
| [| Debtor 1 o | | | Check all that apply. | | | | |
| į | Debtor 2 o | • | An agreeme car loan) | nt you made (such as mortgage or s | secured | | | |
| (| | nd Debtor 2 only | | (such as tax lien, mechanic's lien) | | | | |
| Į | | e of the debtors and another | Judgment lie | n from a lawsuit | | | | |
| ŗ | Chack if | his claim relates to a | Other (includ | ing a right to offset) | | - | | |
| • | communi | | | | | | | |
| £ | Date debt was | s incurred | Last 4 digits of | account number | | | | |
| 2.2 | Control of the Control of the Control | r and medical little may be differ him that have been that seed to be a seen when the seed to be suited for suited the seed to be suited for su | and the second section of the second | operty that secures the claim: | co-decident disease, | | | Philippine and a second section of the section of the second section of the section of the second section of the section of |
| | Creditor's Name | ÷ | | operty that secures the claim. | | ъ | \$\$ | |
| | | | | | | 177 | | |
| | Number | Street | | | F-777010-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | |
| | | | | ou file, the claim is: Check all th | at apply. | | | |
| | | | Contingent | | | | | |
| | City | State ZIP Coo | Unliquidated | | | | | |
| 1.0 | · | | □ Disputed | | | | | |
| | _ | debt? Check one. | | Check all that apply. | | | | |
| - | Debtor 1 or Debtor 2 or | • | | t you made (such as mortgage or s | ecured | | | |
| _ | | ty d Debtor 2 only | car loan) | (such as tax lien, mechanic's lien) | | | | |
| | | of the debtors and another | | (such as tax ilen, mechanic's ilen) i from a lawsuit | | | | |
| | | | | ng a right to offset) | | | | |
| L | J Check if the communit | is claim relates to a | , | У | | | | |
| D | ate debt was | | Last 4 dinite of | account number | | | | |
| lenomike | and the state of t | Harman persentative de la completa del la completa de la completa de la completa de la completa de la comple | CONTRACTOR CONTRACTOR AND | page. Write that number her | | and the second of the first state of the country of the second of the state of the state of the second of the seco | t tradición con compresso como esta de plação de fonção do commente de maisso por expensão de productivo de co | er denskunfaren ennep 18 Gappende Alberto - bibraker |
| | | w. jwar viidios | volume A on the | hafer serve nigr unwock bel | v. | Ψ | | |

Document

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Debtor 1

DUWON GADDIS

Last Name

Case number (if known)_

| Part 1: After listing any entries on the by 2.4, and so forth. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecure portion If any | |
|--|--|--|--|---|
| Creditor's Name | Describe the property that secures the claim: | \$ | \$ | \$ |
| | | | | Ψ |
| Number Street | | - A A A REMINISTER OF THE A STATE OF | | |
| | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | Contingent Unliquidated | | | |
| | Disputed | | | |
| Who owes the debt? Check one. | | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| The state of the s | Doc or the 4th of the second s | and distributed the highest and constructive to the professional transformation to properly and relationships | en de servición en emperor de servición de designata en contrato e de servición de servición de servición de s | Podra etti etteri esiteri per periori de esiteri de |
| Creditor's Name | Describe the property that secures the claim: | \$ | \$\$ | |
| | | | | |
| Number Street | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 1 and Debtor 2 only | car loan) | | | |
| At least one of the debtors and another | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | enter encountries de commencial de la commencia de la commencia de la companio de la commencia del la commencia de la commencia de la commencia del la | Romane personalisti kapatilan parti salah salah salah salah salah salah salah salah salah personala sal | adarlinen erreitettita kinigente partuutta erittä soon eestiperiitänen eritemasta, vationasta, vationasta, va | |
| Creditor's Name | Describe the property that secures the claim: \$ | | <u> </u> | |
| | | | | |
| Number Street | | | | |
| | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | ☐ Contingent ☐ Unliquidated | | | |
| Judes Zir Code | ☐ Disputed | | | : |
| Who owes the debt? Check one. | | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | : |
| | Other (including a right to offset) | | | i |
| Check if this claim relates to a community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | | | 100 |
| Add the dollar value of your entries | in Column A on this page. Write that number here: \$ | | | |
| If this is the last page of your form, a Write that number here: | add the dollar value totals from all pages. | | | |

Case 16-31058

Doc 1

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Case number (if known)

Debtor 1

DUWON GADDIS

Middle Name

Last Name

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List Others to Be Notified for a Debt That You Already Listed Part 2:

| you have m | ge only if you have oth rying to collect from your ore than one creditor if for any debts in Part 1, | for any of the debte th | man and the second second | for a debt that you already listed in Part 1. For example, if a collection t the creditor in Part 1, and then list the collection agency here. Similarly, if 1, list the additional creditors here. If you do not have additional persons to |
|------------|---|-------------------------|--|--|
| | | | una paye. | |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| Manakan | | | | Last 4 digits of account number |
| Number | Street | | | |
| City | | State | ZIP Code | |
| | | | e de la companya de l | On which the star Day on the |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| Number | Street | | | Last 4 digits of account number |
| | Sueei | | | |
| City | *************************************** | State | ZIP Code | |
| | | | wordy | |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| | | | | Last 4 digits of account number |
| Number | Street | | | |
| | | | | |
| City | | State | ZIP Code | |
| | | | | On which line in Part 1 did you enter the creditor? |
| Name | | | | Last 4 digits of account number |
| Number | Street | | | - |
| | | | - | _ |
| City | | State | | - |
| 1 | | Sidle | ZIP Code | |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| · **ATTIG | | | | Last 4 digits of account number |
| Number | Street | | | |
| | | | | |
| City | *************************************** | State | ZIP Code | |
| | | | | |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| | | | | Last 4 digits of account number |
| Number | Street | | ************************************** | |
| City | | 0 | | |
| | | State | ZIP Code | |

| D | ebtor 1 COSOVER 21058 Doc 1 Filed 09/29/ | | Main | |
|-----|--|---|--------------------------------------|--|
| | ert 2: List All of Your NONPRIORITY Unsecured Clain | 15 | | *************************************** |
| 3. | Do any creditors have nonpriority unsecured claims against y | ou? | | |
| | No. You have nothing to report in this part. Submit this form to Yes | the court with your other schedules. | | |
| 4. | List all of your nonpriority unsecured claims in the alphabetica nonpriority unsecured claim, list the creditor separately for each claincluded in Part 1. If more than one creditor holds a particular claim claims fill out the Continuation Page of Part 2. | al order of the creditor who holds each claim. If a creditor h | as more ot list da nonpriori | than one ims already ty unsecured |
| 4 1 |] 222/4 | | Tota | al claim |
| L | COOK LAW MAGISTRATE Nonpriority Creditor's Name | Last 4 digits of account number | | |
| | 50 W WASHINGTON | When was the debt incurred? | \$ | 1,700.00 |
| | Number Street CHICAGO IL 60602 | | | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | Who incurred the debt? Check one. | Contingent | | |
| | Debtor 1 only | Unliquidated Disputed | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | Student loans Obligations arising out of a separation agreement or divorce | | |
| | Is the claim subject to offset? | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt | | |
| | □ No □ Yes | Other. Specify | 5 | |
| 4.2 | | MATERIA SANTANIA | | : |
| | ENHANCED RECOVERY COMPANY Nonpriority Creditor's Name | Last 4 digits of account number | \$ | 304.00 |
| | PO BOX 57547 | When was the debt incurred? | | |
| | Number Street JACKSONVILLE FL 32241 | As of the date you file the all-lines | | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent | | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | | |
| | Debtor 1 only Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | Student foans | | |
| | Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | Is the claim subject to offset? | ☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify | | |
| | Yes | | | |
| 4.3 | SIXTH MUNCIPAL DISTRICT COURTHOUSE Nonpriority Creditor's Name | Last 4 digits of account number | will below have comment to your hand | White the second of the seco |
| | 16501 SOUTH KEDZIE PARKWAY RM119 | When was the debt incurred? | \$ | 500.00 |
| 1 | Number Street | | | |
| - | MARKHAM IL 60428 City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | Nho incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only Debtor 2 only | Unliquidated Disputed | | |
| Ç | Debtor 1 and Debtor 2 only | | | |
| Ĺ | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |

Official Form 106E/F

☐ No

☐ Yes

☐ Check if this claim is for a community debt

Is the claim subject to offset?

□ Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Other, Specify

Debts to pension or profit-sharing plans, and other similar debts

| Fill in this information to identify your case: | | Dans 27 of EC | | Desc Ma | |
|--|--|--|------------------------------------|-------------------|--|
| | DOCUMEN | Page 27 of 56 | | | |
| Debtor 1 DUWON GADDIS | | | | | |
| First Name Middle Nam Debtor 2 | e Last Name | | | | |
| (Spouse, if filing) First Name Middle Nam | e Last Name | | | | |
| United States Bankruptcy Court for the: Northern Di | istrict of Illinois | | | | |
| Case number (If known) | | | | | Check if this is ar |
| | | | | â | imended filing |
| Official Form 106E/F | | | | | |
| Schedule E/F: Creditors | Who Have | Unsecured Cla | ims | | 12/15 |
| Be as complete and accurate as possible. Use List the other party to any executory contracts A/B: Property (Official Form 106A/B) and on Sc creditors with partially secured claims that are needed, copy the Part you need, fill it out, num any additional pages, write your name and cas | chedule G: Executory Co- listed in Schedule D: Cr ber the entries in the bo- e number (if known). | intracts and Unexpired Lease | o list executor s (Official For | y contracts o | n Schedule |
| Part 1: List All of Your PRIORITY Unse | | | | | |
| Do any creditors have priority unsecured cl No. Go to Part 2. | aims against you? | | | | |
| Yes. | | | | | |
| 2. List all of your priority unsecured claims. If | a creditor has more than | no priority | | | |
| each claim listed, identify what type of claim it is nonpriority amounts. As much as possible, list t | s. If a claim has both prior | ity and nonpriority amounts, lis | t the creditor set that claim bere | eparately for ea | ach claim. For |
| unsecured claims, fill out the Continuation Page | of Part 1. If more than on | as creditor holds a result of | name. If you h | ave more than | two priority |
| (For an explanation of each type of claim, see the | he instructions for this form | n in the instruction booklet) | iim, list the othe | er creditors in f | Part 3. |
| | | and a dead of bookiet.) | | | |
| | | | Total claim | Priorite | . Atmospherical and a second an |
| 1 | | | Total claim | Priority amount | Nonpriority amount |
| | Last 4 digits of acco | runt number | | amount | Nonpriority amount |
| Priority Creditor's Name | | unt number | | | Nonpriority amount |
| | Last 4 digits of acco | | | amount | Nonpriority amount |
| Priority Creditor's Name | When was the debt i | | \$ | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code | When was the debt i As of the date you fil Contingent | ncurred? | \$ | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. | When was the debt i As of the date you fil Contingent Unliquidated | ncurred? | \$ | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. | When was the debt i As of the date you fil Contingent | ncurred? | \$ | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | When was the debt i As of the date you fil Contingent Unliquidated Disputed | ncurred? | \$ | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | When was the debt i As of the date you fil Contingent Unliquidated Disputed Type of PRIORITY u | incurred? le, the claim is: Check all that applications to the claim is: check all that applications are claim: | \$ | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | When was the debt i As of the date you fil Contingent Unliquidated Disputed Type of PRIORITY u Domestic support of | incurred? le, the claim is: Check all that applications insecured claim: bligations | \$ orly. | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | When was the debt in As of the date you file Contingent Unliquidated Disputed Type of PRIORITY und Domestic support of Taxes and certain of Claims for death or | le, the claim is: Check all that applications ther debts you owe the government | \$ orly. | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | When was the debt in the date you fill the date | Incurred? Ite, the claim is: Check all that applications ther debts you owe the government of the personal injury while you were | \$ ply. | amount | Nonpriority amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | When was the debt in As of the date you file Contingent Unliquidated Disputed Type of PRIORITY UDDOMESTIC Support of Taxes and certain of Claims for death or intoxicated Other. Specify | incurred? le, the claim is: Check all that applications ther debts you owe the government personal injury while you were | \$ | amount | amount |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes | When was the debt in As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the properties of the properties o | Incurred? Ile, the claim is: Check all that applications ther debts you owe the government personal injury while you were | \$ | amount | amount \$\$ |
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| Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. | As of the date you file As of the date you file Contingent Unliquidated Disputed Type of PRIORITY understic support of Taxes and certain of Claims for death or intoxicated Other. Specify Last 4 digits of accountly when was the debt in As of the date you file Contingent | incurred? le, the claim is: Check all that applications ther debts you owe the government personal injury while you were int number | \$ | amount | amount \$\$ |
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| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | As of the date you file As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the continuous cated Claims for death or intoxicated Other. Specify Last 4 digits of account when was the debt in the continuous cated Contingent Unliquidated Disputed Type of PRIORITY under the continuous cated Disputed | Incurred? Insecured claim: | \$ | amount | amount \$\$ |
| Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only | As of the date you file As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the continuous cated Claims for death or intoxicated Other. Specify Last 4 digits of account when was the debt in Contingent Unliquidated Disputed Type of PRIORITY under the continuous cated Disputed Type of PRIORITY under the continuous cated Disputed | Incurred? Insecured claim: | \$ | amount | amount \$\$ |
| Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the date or intoxicated Cottens for death or intoxicated Cottens Specify Last 4 digits of account when was the debt in Contingent Unliquidated Disputed Type of PRIORITY under the debt or intoxicated Contingent Unliquidated Disputed Type of PRIORITY under the debt of PRIORITY under the d | Incurred? Insecured claim: I | \$ | amount | amount \$\$ |
| Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the date of the date you file Calaims for death or intoxicated Other. Specify Last 4 digits of account when was the debt in the date you file Contingent Unliquidated Disputed Type of PRIORITY under the death or perintoxicated Claims for death or perintoxicated Claims for death or perintoxicated | Insecured claim: bligations ther debts you owe the government personal injury while you were nt number curred? the claim is: Check all that apple secured claim: ligations ler debts you owe the government arsonal injury while you were | \$ | amount | amount \$\$ |
| Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the date of the date you file Calaims for death or intoxicated Other. Specify Last 4 digits of account when was the debt in the date you file Contingent Unliquidated Disputed Type of PRIORITY under the death or perintoxicated Claims for death or perintoxicated Claims for death or perintoxicated | Incurred? Insecured claim: I | \$ | amount | amount \$\$ |

Debtor 1

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Last Name Document Page 28 of 56e number (# known)

Your PRIORITY Unsecured Claims — Continuation Page Part 1:

| An | er listing any entries on this page, number the | em beginning with 2.3, followed by 2.4, and so forth. | Total claim | Priority amount | Nonpriority amount |
|-------|--|--|--|--|--|
| | Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| | Number Street | When was the debt incurred? | | | |
| | | As of the date you file, the claim is: Check all that apply | | | |
| | City State ZIP Code | Contingent Unliquidated | | | |
| | | Disputed | | | |
| | Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only | Domestic support obligations | | | |
| | At least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | | Claims for death or personal injury while you were | | | |
| | Check if this claim is for a community debt | intoxicated | | | |
| | is the claim subject to offset? | Other. Specify | | | |
| | □ No | | | | |
| ···· | Tentra production of the control of | | | | |
| | Priority Creditor's Name | Last 4 digits of account number | | | \$ |
| | The state of the s | | | | |
| | Number Street | When was the debt incurred? | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | | ☐ Contingent | | | |
| | City State ZIP Code | Unliquidated | | | |
| | | Disputed | | | |
| | Who incurred the debt? Check one. | ■ Disputed | | | |
| | Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only | Domestic support obligations | | | |
| | At least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | | Claims for death or personal injury while you were | | | : |
| | Check if this claim is for a community debt | intoxicated | | | |
| | | Other. Specify | | | |
| | s the claim subject to offset? | | | | |
| (| □ No | | | | |
| [| 2 Yes | | | | |
| ╝- | | Last 4 digits of account number | \$ | in in the contract of the industry of the contract of the cont | angung kermindal masal mangan kelangan di menjangkan di melangkan di melangkan di melangkan di melangkan di me |
| | riority Creditor's Name | When was the debt incurred? | Φ_ | | \$ |
| N | lumber Street | | | | |
| ries. | | As of the date you file, the claim is: Check all that apply. | | | |
| ō | ity State ZIP Code | Contingent | | | |
| · | ny State ZIP Code | Unliquidated | | | |
| V | /ho incurred the debt? Check one. | ☐ Disputed | | | |
| | Debtor 1 only | Type of PRIODITY | | | |
| | Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Domestic support obligations | | | |
| | At least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | | Claims for death or personal injury while you were | | | |
| | Check if this claim is for a community debt | intoxicated Other. Specify | randomer for a feet and the second section of the second section of the second section of the se | | and the contract of the contra |
| ls | the claim subject to offset? | | | | |
| | No | | | | |
| | Yes | | | | |
| | | | | | |

| Debtor 1 CaseVictor 31058 Doc 1 | Filed 09/29 | | |
|--|--|---|--|
| Parti2: List All of Your NONPRIORITY (| | | |
| Do any creditors have nonpriority unsecure No. You have nothing to report in this part. | d claime against | | |
| 4. List all of your nonpriority unsecured claims | in the alphabetic | cal order of the creditor who holds each claim. If a creditor laim. For each claim listed, identify what type of claim it is. Do make the other creditors in Part 3.If you have more than three | nas more than one not list claims already nonpriority unsecured |
| SANTANDER CONSUMER USA Nonpriority Creditor's Name | | last 4 digits of page | Total claim |
| PO BOX 961245 Number Street | | Last 4 digits of account number When was the debt incurred? | \$21,448.00 |
| FORT WORTH TX City State | 76161 ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only | | Contingent Unliquidated Disputed | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority along. | |
| Is the claim subject to offset? No Yes | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt Other. Specify | ; s |
| CITY OF CHICAGO DEPT OF REV Nonpriority Creditor's Name PO BOX 804556 Number Street | responding and high production of the contract of the state of the sta | Last 4 digits of account number | \$ |
| CHICAGO IL City State | 60680 ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | 5565 | Contingent Unliquidated Disputed | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | | Type of NONPRIORITY unsecured claim: Student loans | |
| Check if this claim is for a community debtIs the claim subject to offset?No | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and attractions in | |
| 4.3 FIRST PREMIER BANK | Tribul de pennis d'indicion es municipa (pennis de pennis de pende de pennis de pennis de pennis de pennis de p | Other. Specify Other specify | and a Standard and the Control of Antisystem in Standard for Control of the Contr |
| Nonpriority Creditor's Name 3820 N LOUISE AVE Number Street | | Last 4 digits of account number | 922.00 |
| SIOUX FALLS SD City State | 57107 ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | ☐ Contingent ☐ Unliquidated ☐ Disputed | |
| At least one of the debtors and another | | Type of NONPRIORITY unsecured claim: Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| Official Form 106E/F | 0 E/E, C | Who Have Unecount OL 1 | |

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| Aft | er listing any entries on this page, n | umber ti | nem beginning wi | th 4.4, followed by 4.5, and so forth. | Total claim | |
|-------------------|---|---|---|---|-------------|--|
| | SECRETARY OF STATE BA | | TCY DEPT | Last 4 digits of account number | \$_3,600.00 | |
| | 2701 S DIRKSEN PARKWAY | | | When was the debt incurred? | | |
| | SPRINGFIELD | IL | 62723 | As of the date you file, the claim is: Check all that apply. | | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu Is the claim subject to offset? No Yes | | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | | |
| .ve | SW CREDIT SYSTEMS L.P Nonpriority Creditor's Name | eller i rejelent elsettent estatograf | ka tillettyn i kantifelin kultig en fynafyttyn ei vinddi. Mefontlyn gan tersyyd | Last 4 digits of account number | \$ 834.00 | |
| | 4120 INTERNATIONAL 1100 | | | When was the debt incurred? | | |
| | Number Street CARROLLTON | TX | 75007 | As of the date you file, the claim is: Check all that apply. | | |
| | City | State | ZIP Code | Contingent | | |
|))) !! | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communist the claim subject to offset? No Yes | ity debt | | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | | |
| | ARNOLD SCOTT HARRIS Onpriority Creditor's Name | Standard geography of the Standard Standard | An destination and the second of the second second section (second section (second section (second section (sec | Last 4 digits of account number | \$_7,600.00 | |
| _1 | 11 W JACKSON BLVD | | | When was the debt incurred? | | |
| | umber Street CHICAGO | IL | 60604 | As of the date you file, the claim is: Check all that apply. | | |
| ©; W | | tate | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| ls | At least one of the debtors and another Check if this claim is for a community the claim subject to offset? No Yes | y debt | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | i. | |

Debtor 1 Cassevi.6x84.058|S Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Last Nath Document Page 31 of 56se number (#known)

Para 18a

List Others to Be Notified About a Debt That You Already Listed

| | you do not have addition | I about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For from you for a debt you owe to someone else, list the original creditor in Parts 1 or you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the all persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
|---|---|--|
| Name | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | Last 4 digits of account number |
| City | State ZIP C | 0de |
| Name | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| N | | |
| Number Street | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | Claims Part 2: Creditors with Nonpriority Unsecured |
| City | State ZiP Co | Last 4 digits of account number |
| Name | er entsterfordisterstatus – et il 1960 – en en gibbles et diestat diabetes forments et tri diest festigen for e | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | |
| Number Street | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| 1 | | Claims Part 2: Creditors with Nonpriority Unsecured |
| City | State ZIP Cod | Last 4 digits of account number |
| ame | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | |
| umber Street | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | Claims Part 2: Creditors with Nonpriority Unsecured |
| y | State ZIP Code | |
| me | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | |
| mber Street | | - Part 1: Creditors with Priority Unsecured Claims |
| | | Claims Part 2: Creditors with Nonpriority Unsecured |
| | State ZIP Code | Last 4 digits of account number |
| пе | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| ber Street | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | Claims Claims Claims |
| | | |
| and facilities and combined our company commission of the section | State ZIP Code | Last 4 digits of account number |
| | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| er Street | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | Claims Part 2: Creditors with Nonpriority Unsecured |

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.

Total claim 6a. 0.00 6b. 0.00 6c. 0.00 6d. 0.00 6e. 0.00 Total claim 61. 0.00 6g. 0.00 6h. 0.00

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- Other. Add all other priority unsecured claims.
 Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claims 6f

from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims.
 Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6i. + _{\$____} 40,908.00
- 6j. \$_____40,908.00

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| | | | THE PERSON NAMED OF THE PE | ocumen Pa | ye 33 01 30 | |
|-----------------------------|---|--|--|--|--|--|
| Fill in thi | s informatio | n to identify yo | our case: | | | |
| Debtor | DUWO | N GADDIS | | | A CONTRACTOR OF THE CONTRACTOR | |
| | First Name | | Middle Name | Last Name | | |
| Debtor 2 (Spouse If file | ng) First Name | | Middle Name | Last Name | | |
| United Stat | es Banknintov | Court for the: No | rthern District of I | | | |
| | | Codition die, 140 | referri District OF I | HHIOIS | | |
| Case numb (If known) | er | | | | | |
| ***** | | | | | | Check if this is a amended filing |
| | | | | | | , |
| Official | Form 1 | 106G | | | | |
| Scher | lulo C | Evoc | tam. Ca. | | ## . | |
| | adic O | . Execu | tory cor | itracts and | Unexpired Leases | 12/15 |
| 1. Do you No. Yes | have any e Check this b Fill in all of | xecutory controx and file this the information | acts or unexpire form with the could | ed leases? It with your other sched contracts or leases are | mber the entries, and attach it to this page. On the entries and attach it to this page. On the entries are to report on this formulated on Schedule A/B: Property (Official Formulated on lease. Then state what each contract or in the interest of the interest. | n. 106A/B). |
| | | | | | ct or lease. Then state what each contract or in the instruction booklet for more examples of e | xecutory contracts and |
| Person | or company | with whom yo | ou have the cont | ract or lease | State what the contract or lease is for | |
| 1 | | | | | | |
| | | *************************************** | | | | |
| Name | | | | | | |
| Number | Street | | | | | |
| | | | | | | |
| City | | State | ZIP Code | | | |
| | | | | | The state of the s | |
| Name | | | | | | |
| Month | ····· | | | | | |
| Number | Street | | | | | |
| City | | State | ZIP Code | *************************************** | | |
| | | | | | the transfer of the second | eren eren eren eren eren eren eren eren |
| Name | *************************************** | | | | | |
| | | | | | | |
| Number | Street | | | | | |
| C4. | | | | | | |
| City | | State | ZIP Code | | *************************************** | ورورية والمتعادة |
| | | | | | | |
| Name | | | | | | |
| Number | Street | | | | | |
| | Outel | | | | | |
| City | ····· | State | ZIP Code | | | |
| | | | | | | |
| Name | | | | | | |
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| Number | Street | *************************************** | | | | |
| A: | | | | | | |
| City | | State | ZIP Code | | | |

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Debtor 1

| DUWON | GADDIS |
|-------|---------------|
| | |

| - 02101 | | |
|---|--|--|
| | First Name Middle Name Last Name | Case number (# known) |
| | | |
| | Additional Page if You Have More Contracts or Leases | |
| | s de la contracts of Leases | |
| Perso | on or company with whom you have the contract or lease | |
| | you have the contract or lease | What the contract or lease is for |
| 2 <u>2</u> | | |
| | | |
| Name | | |
| | | |
| Numbe | Street | |
| | | |
| City | State ZIP Code | |
| | State ZIP Code | |
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| Number | Street | |
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| City | State ZIP Code | |

City

Name

Number

Street

2._

State

State

ZIP Code

ZiP Code

Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Document Page 35 of 56 Fill in this information to identify your case: **DUWON GADDIS** Debtor 1 Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an Official Form 106H amended filing Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ☐ No Yes. In which community state or territory did you live? _____ . Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Name Schedule D, line ____ ☐ Schedule E/F, line ____ Number Street ☐ Schedule G, line _____ City State ZIP Code 3.2 Name Schedule D, line _____ ☐ Schedule E/F, line ___ Numbe Street ☐ Schedule G, line ____ City State ZiP Code 3.3 Name ☐ Schedule D, line __ ☐ Schedule E/F, line ____ Number Schedule G, line ____ City ZIP Code

Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main DUWON GADDIS Page 36 of 56 Document Last Name Case number (if known)_

Debtor 1

| 12/2 | NEW RE | Manager 1 | **** | ттан | - |
|------|--------|-----------|------|------|---|
| 36 | | | | | |
| 188 | | | | | |
| 1 | | | | | |
| 183 | | | | | |
| 100 | | | | | |

Additional Page to List More Codebtors

| | | | Column 2. The creditor to whom you owe the del |
|--|-------|----------|--|
| 3 | | | Check all schedules that apply: |
| Name | | | Schedule D, line |
| | | | Schodule D. ine |
| Number Street | | | Schedule E/F, line |
| City | | | |
| | State | ZIP Code | |
| Name | | | Schedule D, line |
| D.I. | | | Schedule E/F, line |
| Number Street | | | Schedule G, line |
| City | | | o, me |
| | State | ZIP Code | - |
| Name | | | |
| | | | Gariedule D, line |
| Number Street | | | Schedule E/F, line |
| C: | | | ☐ Schedule G, line |
| City | State | ZIP Code | |
| | | | |
| Name | | | Chedule D, line |
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| Name | | | Schedulo D. line |
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| A) | | 2-44 | 1. 3 |
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| On acti | | | Schedule G, line |
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| Fill in this information to iden | | | age 37 or 30 | |
|--|--|--------------------------------|--|--|
| Debtor 1 DUWON GADI | DIS | | | |
| First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | | | |
| United States Bankruptcy Court for th | | Last Name | | |
| Case number | e. Northern District of Illino | IS | | |
| (If known) | | | | Check if this is: |
| <u> </u> | THE THE STREET STREET | | 1 _ | An amended filing |
| | | | | A supplement showing postpetition chapter 13 |
| Official Form 106I | -Anna | | | moonle as of the following date: |
| Schedule I: Yo | ur Incomo | | | MM / DD / YYYY |
| | | | 2004 | nd Debtor 2), both are equally responsible for |
| Part 1: Describe Employn 1. Fill in your employment | - 107 of any additional pa | ges, write you | e information about y r name and case num | nd Debtor 2), both are equally responsible for ng with you, include information about your spouse. your spouse. If more space is needed, attach a nber (if known). Answer every question. |
| information. | | Debtor 1 | 1 | D. C. |
| If you have more than one job, attach a separate page with | | | COMPANY STATES A CONTROL AND ASSESSMENT AND ASSESSMENT OF THE STATES ASSESSMENT OF THE STATES ASSESSMEN | Debtor 2 or non-filing spouse |
| Information about additional | Employment status | ☐ Employe | ad | _ |
| employers. | | 2 Not emp | oloyed | ☐ Employed ☐ Not employed |
| Include part-time, seasonal, or self-employed work. | | | | Carlot employed |
| Occupation may include student or homemaker, if it applies. | Occupation | | | |
| | Employer's name | | | |
| | Employer's address | | | |
| | | Number Stree | et | Number Street |
| | | | | |
| | | | | |
| | | City | State ZIP Code | City State ZID Code |
| 1 | How long employed there | ; ? | | City State ZIP Code |
| art 2: Give Details About A | Monthly Income | | _ | |
| | | | | |
| | | | ling to report for any lin | ne, write \$0 in the space. Include your non-filing |
| below. If you need more space, attac | ur a separate sheet to this | form. | on oniproy | cio ioi tilat person on the lines |
| list monthly | | | For Debtor | 1 For Debtor 2 or non-filing spouse |
| List monthly gross wages, salary deductions). If not paid monthly, cal | , and commissions (befor culate what the monthly wa | e all payroll age would be. | 2. | As a marrier of non-station of the designing by any page of the design o |
| Estimate and list monthly overtime | | | 3. +\$ 0.00 | |
| Calculate gross income. Add line 2 | ? + line 3. | | | |
| | | | 4. [\$ 0.00 | |

Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Document Page 38 of 56 **DUWON GADDIS**

Debtor 1

Middle Name

| Copy line 4 here | | | | | | | |
|---|----------------------------|---------|---------|---------------------|---------------------|-----------------------------|----------------------|
| | | MC-1002 | For | Debtor 1 | For Debtor 2 o | r ISe | |
| | 🤧 4 | 4. | \$ | 0.00 | \$ | | |
| 5. List all payroll deductions: | | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5: | a | \$ | 0.00 | _ | | |
| 5b. Mandatory contributions for retirement plans | 51 | | ୬ \$ | 0.00 | \$ | | |
| 5c. Voluntary contributions for retirement plans | 50 | | ν Β | 0.00 | \$ | | |
| 5d. Required repayments of retirement fund loans | 50 | | P S | <u>0.00</u> 0.00 | \$ | | |
| 5e. Insurance | 5e | • | | 0.00 | \$ | | |
| 5f. Domestic support obligations | 5f. | • | | 0.00 | \$ | | |
| 5g. Union dues | | | | 0.00 | \$ | | |
| 5h. Other deductions. Specify: \ | 5g | • | | | \$ | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + | 5h. | +\$ | | 0.00 | + \$ | | |
| | +5h. 6. | \$_ | | 0.00 | \$ | | |
| Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | | 0.00 | | | |
| | • • | Ψ_ | | 0.00 | \$ | | |
| 8. List all other income regularly received: | | | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | | |
| 8b. Interest and dividends | 8a. | \$ | | 0.00 | \$ | - | |
| 8c. Family support payments that you, a non-filing spouse, or a depen regularly receive | 8b. | \$ | | 0.00 | \$ | | |
| Include alimony, spousal support, shill and | ident | | | | - | ** | |
| , particility | 8c. | \$ | | 0.00 | \$ | | |
| 8d. Unemployment compensation 8e. Social Security | 8d. | \$ | | 0.00 | ¢ | • | |
| - | 8e. | \$ | | 0.00 | \$ \$ | | |
| 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | | r. | | | ¥ | | |
| 8g. Pension or retirement income | _ 8f. | \$ | | 0.00 | \$ | | |
| | 8g. | \$ | | 0.00 | \$ | | |
| 8h. Other monthly income. Specify: | 8h. + | \$ | | 0.00 | +\$ | | |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | | 0.00 | | 1 | |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | e | | | \$ | <u> </u> | |
| State all other regular contributions to the expenses that you list in Scheolinclude contributions from an unmarried partner, members of your household, you not include a second of the second o | 10 dule J. your depe | endent | | | \$ | = <u> </u> \$ | 0.00 |
| Do not include any amounts already included in lines 2.40 - | , - | | -, ,, | Binnioo | es, and other | | |
| Do not include any amounts already included in lines 2-10 or amounts that are respective: | not availa | ble to | pay | expenses li | sted in Schedule J. | | |
| Add the amount in the last column of line 10 to the amount in line 11. The rewards when the Summary of Your Assets and Liabilities and Certain St. | | | | | 11, 4 | \$ | 0.00 |
| 3. Do you expect an increase or decrease within the year after you file this fo No. Yes. Explain: | | monn | auon | , ग स applies | 12. | \$Combin monthly | 0.00 ed income |

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| | Document | Page 39 01 50 | | | |
|--|--|---|----------------------|--|----------------------------------|
| Fill in this information to iden | tify your case: | | | | |
| Debtor 1 DUWON GADE | DIS | | | | |
| First Name Debtor 2 | Middle Name Last Name | Check | if this | ie. | |
| (Spouse, if filing) First Name | Middle Name Last Name | | | | |
| United States Bankruptcy Court for the | | DAS | unnlen | ded filing | ostpetition chapter 13 |
| Case number | and the continuous | ехр | enses | as of the follow | ostpetition chapter 13 ing date: |
| (if known) | \$1000000000000000000000000000000000000 | | / DD / | | 3 |
| Official Form 106J | | | | | |
| | | | | | |
| Schedule J: Yo | our Expenses | | | | |
| Be as complete and accurate an | | ** | Action Manager | | 12/15 |
| information. If more space is nee | possible. If two married people are f ded, attach another sheet to this for n. | iling together, both are equall | y resp | onsible for supp | lying correct |
| A second deep question | n. | on the top of any additions | ai page | s, write your na | me and case number |
| Pariety Describe Your Ho | usehold | | | | |
| 1. Is this a joint case? | | | | ···· | |
| No. Go to line 2. | | | | | |
| Yes. Does Debtor 2 live in a | separate household? | | | | |
| ☐ No | | | | | |
| ☐ Yes. Debtor 2 must fi | le Official Form 106J-2, Expenses for S | Separate Household of Debtor 2 | | | |
| - oo you have dependents? | ₩ No | | • | mada aan oo dadaa ah ah aan ah ah aan ah | |
| Do not list Debtor 1 and Debtor 2. | Yes. Fill out this information for | Dependent's relationship to Debtor 1 or Debtor 2 | | Dependent's | Does dependent live |
| Do not state the dependents' | each dependent | ACCORDING TO F DEDIO 2 | diogy: | age | with you? |
| names. | | | | | ☐ No |
| | | | | | ☐ Yes |
| | | | | | ☐ No |
| | | | | | ☐ Yes |
| | | | _ | | □ No |
| | | | | | Yes |
| | | | - | | ☐ No ☐ Yes |
| | | | | | ☐ No |
| Do your expenses include | the second secon | | - | | Yes |
| expenses of people other than | ₩ No | | ***** | the terre and a surface | |
| VOUISEIT and mous domains a co | Yes | | | | |
| yourself and your dependents? | | | | | |
| | Monthly Expanses | | | | |
| Estimate Your Ongoing | 20km-4 52 | | | | |
| art 2: Estimate Your Ongoing | 20km-4 52 | using this form as a supplem | ent in a | a Chapter 13 cas | e to report |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankrupplicable date. | ankruptcy filing date unless you are uptcy is filed. If this is a supplement | and of cueck file DOX | ent in a | a Chapter 13 cas | e to report nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankr applicable date. Include expenses paid for with non-conclude expenses | ankruptcy filing date unless you are uptcy is filed. If this is a supplement | of check the box | ent in a | a Chapter 13 cas | e to report nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your between as of a date after the bankrupplicable date. Include expenses paid for with non-cauch assistance and have included it | ankruptcy filing date unless you are uptcy is filed. If this is a supplement ash government assistance if you known schedule I: Your Income (Official) | now the value of | ent in a | op of the form a | nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your between as of a date after the bankrupplicable date. Include expenses paid for with non-cauch assistance and have included it | ankruptcy filing date unless you are uptcy is filed. If this is a supplement ash government assistance if you known schedule I: Your Income (Official) | now the value of | ent in : at the (| a Chapter 13 cas top of the form a Your expense | nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankr applicable date. Include expenses paid for with non-cuch assistance and have included it. The rental or home ownership expany rent for the ground or lot. | ankruptcy filing date unless you are uptcy is filed. If this is a supplement ash government assistance if you known schedule I: Your Income (Official) | now the value of | ent in a at the f | op of the form a | nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankr applicable date. Include expenses paid for with non-cuch assistance and have included it. The rental or home ownership exp any rent for the ground or lot. If not included in line 4: | ankruptcy filing date unless you are uptcy is filed. If this is a supplement ash government assistance if you known schedule I: Your Income (Official) | now the value of | at the f | Your expense | nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankre expenses as of a date after the bankre expenses paid for with non-cauch assistance and have included it. The rental or home ownership expense any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes | ankruptcy filing date unless you are uptcy is filed. If this is a supplement assistance if you known Schedule I: Your Income (Official enses for your residence, include first | now the value of | at the f | Your expense | nd fill in the |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankrupplicable date. Include expenses paid for with non-cuch assistance and have included it. The rental or home ownership expany rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or rentered. | ankruptcy filing date unless you are uptcy is filed. If this is a supplement ash government assistance if you known Schedule I: Your Income (Official enses for your residence, include first er's insurance | now the value of | at the f | Your expense | 435.00 0.00 |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankr applicable date. Include expenses paid for with non-cauch assistance and have included it. The rental or home ownership exp any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter 4c. Home maintenance, repair, and | ankruptcy filing date unless you are uptcy is filed. If this is a supplement assistance if you known schedule I: Your Income (Official enses for your residence. Include firster's insurance upkeep expenses | now the value of | at the f | Your expense | 98 435.00 0.00 0.00 |
| Estimate Your Ongoing Estimate your expenses as of your be expenses as of a date after the bankr applicable date. Include expenses paid for with non-cauch assistance and have included it. The rental or home ownership exp any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or rented 4c. Home maintenance, repair, and | ankruptcy filing date unless you are uptcy is filed. If this is a supplement assistance if you known schedule I: Your Income (Official enses for your residence. Include firster's insurance upkeep expenses | now the value of | 4. 4a. 4b. | Your expense | 435.00 0.00 |

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Debtor 1

DUWON GADDIS
First Name Middle Name

Last Name

Case number (if known)_

| ند بدو | all the control of th | | Your | expenses |
|-----------------------|--|------------|---------------------------------------|----------|
| | dditional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| | Itilities: | - | | |
| | a. Electricity, heat, natural gas | • | • | |
| 6 | value, garbage collection | 6a | | 0.00 |
| 6 | the priorie, internet, satellite, and cable services | 6b. | · | 0.00 |
| 6 | eposity. | 6c. 6d. | | 0.00 |
| | ood and housekeeping supplies | | \$ | |
| | hildcare and children's education costs | 7. | \$ | |
| | othing, laundry, and dry cleaning | 8. | \$ | |
| | rsonal care products and services | 9. | \$ | |
| 11. M e | edical and dental expenses | 10. | \$ | 0.00 |
| 12. Tr i Do | ansportation. Include gas, maintenance, bus or train fare. not include car payments. | 11. | \$ | |
| | tertainment, clubs, recreation, newspapers, magazines, and books | 12. | \$ | 0.00 |
| 14. Ch | aritable contributions and religious donations | 13, | \$ | 0.00 |
| 15. ins | urance. not include insurance deducted from your pay or included in lines 4 or 20. | 14. | \$ | 0.00 |
| 15a | Life insurance | | | |
| | Health insurance | 15a. | \$ | 0.00 |
| | Vehicle insurance | 15b. | \$ | 0.00 |
| | Other insurance. Specify: | 15c. | \$ | |
| 16. Tax e | s. Do not include taxes deducted from your pay or included in lines 4 as 00 | 15d. | \$ | 0.00 |
| Орск | A1Y. | 16. | \$ | 0.00 |
| 17. Insta | llment or lease payments: | .0. | · · · · · · · · · · · · · · · · · · · | |
| 17a. | Car payments for Vehicle 1 | | | |
| 17b. | Car payments for Vehicle 2 | 17a. | \$ | 0.00 |
| 17c. | Other. Specify: | 17b. | \$ | 0.00 |
| 17d, (| Other. Specify: | 17c. | \$ | 0.00 |
| 18. Your | payments of alimony, maintenance, and support that you did not report as deducted from pay on line 5, Schedule I, Your Income (Official Form 106I). | 17d. | \$ | 0.00 |
| | | 18. | B | 0.00 |
| Specifi | payments you make to support others who do not live with you. | | | |
| 20. Other | real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incon | 19. \$ |) | 0.00 |
| 20a. M | ortgages on other property | ne. | | |
| | eal estate taxes | 20a. \$ | | 0.00 |
| | operty, homeowner's, or renter's insurance | 20b. \$ | | 0.00 |
| | aintenance, repair, and upkeep expenses | 20c. \$ | | 0.00 |
| | omeowner's association or condominium dues | | | |
| | or condominium ques | | | |

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| Debtor 1 | DUWON GAD | DIS | | | | | |
|--|-----------------------------|---------------|---|---------------|-----------------------------|--|----------------------------------|
| | First Name Mide | dle Name | Last Name | C | Case number (if known) | | |
| 22. Calcula 22a. Ado 22b. Cop | Specify: | expenses fo | r Debtor 2), if any, from Official your monthly expenses. | I Form 106J-2 | 21. 22a. 22b. 22c. | +\$ \$ \$ | 0.00 435.00 0.00 435.00 |
| 22 Coloutat | | | | | | Annual Artistan Control Contro | |
| | your monthly net | | | | | | |
| | | | aly income) from Schedule I. | | 23a. | \$ | 0.00 |
| | y your monthly exp | | | | 23b. | -\$ | 435.00 |
| 23c. Subt | tract your monthly e | xpenses fro | m your monthly income. | | [| | |
| 1116 | result is your <i>montl</i> | nly net incom | <i>ae</i> . | | 23c. | \$ | -435.00 |
| mortgage p | e, ao you expect to | finish paving | in your expenses within the good for your car loan within the year because of a modification to the | | | | |
| b≰d No. | | | | | | | |
| Yes. | Explain here: | | | | | | |

Explain here:

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| | | lentify your case: | | |
|---------------------------|--------------------|---|-----------|------------------------------------|
| Debtor 1 | DUWON GA | *************************************** | | |
| Debtor 2 | | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States B | Bankruptcy Court f | for the: Northern District of I | linoic | |
| Case number (if known) | | | mios - | |
| | | | | Charles and |
| | | | | Check if this is ar amended filing |
| Official | Form 10 | 6000 | | - |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| | OT an attorney to help you fill out bankruptcy forms? |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Under penalty of perjury, I declare that I have reathat they are true and correct. | d the summary and schedules filed with this declaration and |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 09/26/2016 MM / DD / YYYY | DateMM / DD / YYYY |

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Case 16-31058 Doc 1 Filed 09/29/16 Entered 09/29/16 14:40:48 Desc Main Page 44 of 56 Document **DUWON GADDIS** Debtor 1 First Name Case number (if known) 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income Sources of income Check all that apply. Gross income (before deductions and Check all that apply. (before deductions and exclusions) exclusions) From January 1 of current year until Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a business Operating a business For last calendar year: Wages, commissions,

Wages, commissions.

Operating a business

Wages, commissions,

Operating a business

bonuses, tips

bonuses, tips

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4. M No

bonuses, tips

Operating a business

Wages, commissions,

Operating a business

bonuses, tips

Yes. Fill in the details.

(January 1 to December 31,

For the calendar year before that:

(January 1 to December 31,

| | Sources of income | - | | |
|--|-------------------|--|--------------------------------------|--|
| | Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | \$ \$ | | \$ \$ |
| | | \$ | | \$ |
| For last calendar year: January 1 to December 31, | | \$ \$ | | - \$ |
| - | | \$ | | - \$ |
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DUWON GADDIS Debtor 1 First Name Case number (if known) List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. ☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment Creditor's Name ☐ Mortgage Car Number Street Credit card Loan repayment Suppliers or vendors City State ZIP Code Other_ Creditor's Name ☐ Mortgage Car Number Street Credit card Loan repayment Suppliers or vendors City ZIP Code Other_ Creditor's Name ☐ Mortgage Car

Number

Street

State

ZIP Code

Credit card Loan repayment ☐ Suppliers or vendors

Other_

Document Page 46 of 56 **DUWON GADDIS** Debtor 1 First Name Case number (if known) Last Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole propnetor. 11 U.S.C. § 101. Include payments for domestic support obligations, M No Yes. List all payments to an insider. Dates of Total amount Amount you still Reason for this payment payment Insider's Name Number Street City State ZIP Code Number Street State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. M No igspace Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment payment paid include creditor's name Insider's Name Number Street State ZIP Code insider's Name Number Street City State ZIP Code

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| CCS Identify Legal Ac | tions. Panassa | essions, and Foreclosure | | | |
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| ist all such matters, including | g personal injury of | y, were you a party in any la | es wsuit, court action, or admi ivorces, collection suits, pater | nistrative p | roceedina? |
| and contract disputes. | , , | adions, of the control of the contro | ivorces, collection suits, pater | nity actions, | support or custody modi |
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| Yes. Fill in the details. | | | | | |
| | | Nature of the case | | | |
| | | | Court or agency | | Status of the o |
| Case title | | | | | |
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| hin 1 year before you filed to eck all that apply and fill in the No. Go to line 11. Yes. Fill in the information be | | was any of your property re | oossessed, foreclosed, garn | ished, attac | ched, seized, or levied? |
| No. Go to line 11. | | was any of your property re | | | |
| No. Go to line 11. | | | possessed, foreclosed, garn | ished, attac | ched, seized, or levied? |
| No. Go to line 11. | | | | | Value of the property |
| No. Go to line 11. Yes. Fill in the information be | | | | | |
| No. Go to line 11. Yes. Fill in the information be | | Describe the property | | | Value of the property |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name | | Describe the property Explain what happened | | | Value of the property |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name | | Describe the property Explain what happened Property was repo | ssessed. | | Value of the property |
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DUWON GADDIS Debtor 1 Middle Name Last Name Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your No No Yes. Fill in the details. Describe the action the creditor took Date action Creditor's Name Amount was taken Number Street City State ZIP Code Last 4 digits of account number: XXXX-___ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? M No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts per person Dates you gave Value the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts per person Dates you gave Value the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you _ Official Form 107

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Page 49 of 56 Document **DUWON GADDIS** Debtor 1 Middle Nami Case number (if known) Last Name 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed that total more than \$600 Date you Value contributed Charity's Name Number Street City State ZIP Code Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other 2 No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss how the loss occurred Date of your Include the amount that insurance has paid. List pending insurance Value of property loss lost claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Z No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment Person Who Was Paid transfer was made Number Street State ZIP Code Email or website address Person Who Made the Payment, if Not You Official Form 107

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Document Page 52 of 56 **DUWON GADDIS** Debtor 1 Middle Nam Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? Name of Storage Facility Name ☐ No Yes Yes Number Street Number Street City State ZIP Code State ZIP Code Part 9: identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? include any property you borrowed from, are storing for, ☑ No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street City State ZIP Code State ZIP Code **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ZÍ No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State ZIP Code

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Document Page 53 of 56 **DUWON GADDIS** Debtor 1 Middle Name Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Court or agency Nature of the case Status of the case Court Name Pending On appeal Number Street Concluded Case number City State ZIP Code Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Business Name Employer Identification number Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed City ____ To ____ ZIP Code Describe the nature of the business Employer Identification number **Business Name** Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed City From _____ To ____ State ZIP Code Official Form 107

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| | Describe the nature of the business Employer Identification number |
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| astitutions, creditors, or other parti | pankruptcy, did you give a financial statement to anyone about your business? Include all financial |
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| Sign Below ave read the answers on this State swers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 357 | ement of Financial Affairs and any attachments, and I declare under penalty of perjury that the rstand that making a false statement, concealing property, or obtaining money or property by fraud for up to \$250,000, or imprisonment for up to 20 years, or both. |
| 2: Sign Below ave read the answers on this State swers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 357. Signature of Debtor 1 | ement of Financial Affairs and any attachments, and I declare under penalty of perjury that the rstand that making a false statement, concealing property, or obtaining money or property by fraud can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. |
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| Fill in this in | formation to identify your case: | _ Document | Page 55 o |
|-----------------|--|----------------|-----------|
| | DUWON GADDIS | | |
| Debtor 2 | rest Name Middle Name | Løst Name | |
| | Middle Name | Last Name | |
| Case number | lankruptcy Court for the: Northern Distric | at of Illinois | |
| (If known) | | **** | |
| | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or

- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 18

List Your Creditors Who Have Secured Claims

| Idonése as | ou listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Offic | nar i Orini 106D), fill in the |
|---|--|--|
| Creditor's name: NONE Description of property securing debt: | the property that is collateral What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | Did you claim the propert as exempt on Schedule C No Yes |
| Creditor's name: Description of property securing debt: | ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | ☐ No ☐ Yes |
| Creditor's name: Description of property securing debt: | Surrender the property. | □ No □ Yes |
| Creditor's name: Description of property securing debt: | ☐ Surrender the property. ☐ Retain the property. | □ No □ Yes |

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Debtor 1

DUWON GADDIS

Middle Name

Last Name

Case number (If known)

| | 2 4 | L | ist | ¥ | our | U |
|--|------------|---|-----|---|-----|---|
| | | | | | | |

Inexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

| Lessor's name: | Will the lease be assumed? ☐ No |
|---|--|
| Description of leased property: | Yes |
| Lessor's name: | |
| Description of leased property: | ☐ No ☐ Yes |
| .essor's name: | |
| Description of leased roperty: | ☐ No ☐ Yes |
| essor's name: | - control statement of the statement of |
| escription of leased operty: | ☐ No ☐ Yes |
| essor's name; | |
| escription of leased operty: | □ No □ Yes |
| ssor's name; | and the original of the original of the original of the original o |
| scription of leased perty: | □ No □ Yes |
| sor's name: | |
| cription of leased perty: | ☐ No ☐ Yes |
| Sign Below | |
| penalty of perjury, I declare that I have indicated my intenti nal property that is subject to an unexpired lease. | ion about any property of my estate that secures a debt and any |
| June of Debtor 1 (1) I A | |
| ATTO DT LIGHTAGE A | of Debtor 2 |